



HAWAII STATE ETHICS COMMISSION

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GIFTS DISCLOSURE STATEMENT

(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due on June 30)

NAME: *Nina Couch*

STATE POSITION: *Investigator IV*

STATE AGENCY: *DECA, Insurance Division*

STATE TEL. NO.: *(808) 506-2296*

STATE MAILING ADDRESS: *PO Box 3614
Hon. HI 96811*

| 1 | DONOR | 2 | DESCRIPTION OF GIFT | 3 | DATE REC'D | 4 | GIFT VALUE | 5 | AGG. VALUE |
|---|--------------------------------------|---|--|---|---------------|---|------------------|---|------------|
| | <i>National Assoc. of Ins. Comm.</i> | | <i>Airfare, hotel, taxi, meals to attend E. Regulation Conference in Kansas City, MI</i> | | <i>6/1/04</i> | | <i>\$ 1350.-</i> | | |
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